

ATLANTA POLICE DEPARTMENT
CITIZEN STATEMENT

EMPLOYEE:	CITIZEN:	OPS #			
CITIZEN NAME (LAST,FIRST,MI)		RACE	SEX	DOB	DATE & TIME OF STATEMENT
ADDRESS		SSN		HOME PHONE	WORK PHONE

I am Investigator of the Atlanta Police Department. By you making this statement you are providing information in an investigation being conducted by the Atlanta Police Department. Please be advised that your statement and/or your testimony may be needed at a future time for use in a civil service hearing or court of law.

I have read or had read to me the above statement and I swear or affirm that it is true to the best of my knowledge and belief.

CITIZEN SIGNATURE

Sworn and subscribed to me this 06 day _____ July 200

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PRINT CITIZEN NAME

NOTARY PUBLIC

P - _____ - 1 - _____